

31064 U.S. PTO  
03/19/01

3-19-00 905701 .031901 A/PROV

Please type a plus sign (+) inside this box → ☐

Approved for use through 10/31/2002. OMB 0651-  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
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# PROVISIONAL APPLICATION FOR PATENT COVER SHEET

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(c).

INVENTOR(S)					
Given Name (first and middle [if any])		Family Name or Surname		Residence (City and either State or Foreign Country)	
Rolf Holger		Wolters		Honolulu, HI	
<input type="checkbox"/> Additional inventors are being named on the ____ separately numbered sheets attached hereto					
TITLE OF THE INVENTION (280 characters max) Mosaic Filter Multi-spectral Imaging					
Direct all correspondence to: CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number		<input type="text"/>		Place Customer Number Bar Code Label here	
OR Type Customer Number here					
<input checked="" type="checkbox"/> Firm or Individual Name		STI Industries®			
Address		Grosvenor Center, Makai Tower			
Address		733 Bishop St., 31st Floor			
City		Honolulu	State	Hawaii	ZIP 96813
Country		USA	Telephone	(808) 540-4700	Fax (808) 540-4850
ENCLOSED APPLICATION PARTS (check all that apply)					
<input checked="" type="checkbox"/> Specification Number of Pages		4		<input type="checkbox"/> CD(s), Number <input type="text"/>	
<input type="checkbox"/> Drawing(s) Number of Sheets		<input type="text"/>		<input type="checkbox"/> Other (specify) <input type="text"/>	
<input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76					
METHOD OF PAYMENT OF FILING FEES FOR THIS PROVISIONAL APPLICATION FOR PATENT					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.				FILING FEE AMOUNT (\$)	
<input checked="" type="checkbox"/> A check or money order is enclosed to cover the filing fees				75	
<input type="checkbox"/> The Commissioner is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number: <input type="text"/>					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.					
<input checked="" type="checkbox"/> No.					
<input type="checkbox"/> Yes, the name of the U.S. Government agency and the Government contract number are: _____					

Respectfully submitted,

SIGNATURE

TYPED or PRINTED NAME

TELEPHONE

Rolf Wolters

(808) 540-4728

Date 3/8/01

REGISTRATION NO.

(if appropriate)

Docket Number:

## USE ONLY FOR FILING A PROVISIONAL APPLICATION FOR PATENT

This collection of information is required by 37 CFR 1.51. The information is used by the public to file (and by the PTO to process) a provisional application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 hours to complete, including gathering, preparing, and submitting the complete provisional application to the PTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Provisional Application, Assistant Commissioner for Patents, Washington, D.C. 20231.

**PROVISIONAL APPLICATION COVER SHEET**  
*Additional Page*

PTO/SB/16 (8-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Docket Number		Type a plus sign (+) inside this box →	+
INVENTOR(S)/APPLICANT(S)			
Given Name (first and middle [if any])	Family or Surname	Residence (City and either State or Foreign Country)	

Number \_\_\_\_ of \_\_\_\_

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**STATEMENT CLAIMING SMALL ENTITY STATUS  
 (37 CFR 1.9(f) & 1.27(c))--SMALL BUSINESS CONCERN**

Docket Number (Optional)

Applicant, Patentee, or Identifier: Rolf Wolters

Application or Patent No.: \_\_\_\_\_

Filed or Issued: \_\_\_\_\_

Title: Mosaic Filter Multi-spectral Imaging

I hereby state that I am

☐ the owner of the small business concern identified below:

☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN STI Industries®

ADDRESS OF SMALL BUSINESS CONCERN Grosvenor Center, Makai Tower  
733 Bishop St., 31st Floor; Honolulu, HI 96813

I hereby state that the above identified small business concern qualifies as a small business concern as defined in 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Trademark Office. Questions related to size standards for a small business concern may be directed to: Small Business Administration, Size Standards Staff, 409 Third Street, SW, Washington, DC 20416.

I hereby state that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

- ☒ the specification filed herewith with title as listed above.  
☐ the application identified above.  
☐ the patent identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization having any rights in the invention is listed below:

- ☒ no such person, concern, or organization exists.  
☐ each such person, concern, or organization is listed below.

Separate statements are required from each named person, concern or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

NAME OF PERSON SIGNING Rolf Wolters

TITLE OF PERSON IF OTHER THAN OWNER \_\_\_\_\_

ADDRESS OF PERSON SIGNING as above

SIGNATURE \_\_\_\_\_

DATE

3/8/07

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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$ 75.00)**Complete if Known**

Application Number

Filing Date

First Named Inventor

Examiner Name

Group Art Unit

Attorney Docket No.

**METHOD OF PAYMENT**

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
NumberDeposit  
Account  
Name☐ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17☒ Applicant claims small entity status.  
See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money  
Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Fee Fee Fee Fee Description  
Code (\$) Code (\$)

101 710 201 355 Utility filing fee

106 320 206 160 Design filing fee

107 490 207 245 Plant filing fee

108 710 208 355 Reissue filing fee

114 150 214 75 Provisional filing fee

Fee Paid

**SUBTOTAL (1)** (\$ 75.00)**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	X	=
Independent Claims	-3** =	X	=
Multiple Dependent			=

Large Entity Small Entity

Fee Fee Fee Fee  
Code (\$) Code (\$)

Fee Description

103 18 203 9 Claims in excess of 20

102 80 202 40 Independent claims in excess of 3

104 270 204 135 Multiple dependent claim, if not paid

109 80 209 40 \*\* Reissue independent claims  
over original patent110 18 210 9 \*\* Reissue claims in excess of 20  
and over original patent**SUBTOTAL (2)** (\$ 0.00)

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Fee Code	Large Entity (\$)	Fee Code	Small Entity (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 0.00)**SUBMITTED BY**

Name (Print/Type)

Rolf Wolters

Registration No.  
(Attorney/Agent)

Complete (if applicable)

Telephone

Signature

[Signature]

Date

3/8/01

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